

JOSEPH A. HOLMES SAFETY ASSOCIATION  
SCHOLARSHIP COMMITTEE  
P.O. Box 2253  
Meriden, Connecticut 06450



**CHAIRPERSON**

Cheryl Suzio  
(203)237-8421

**PURPOSE:** The Joseph A. Holmes Safety Association endeavors to promote health and safety within the mining industry. We believe that providing financial aid to students in the pursuit of education related to mining safety will result in safer mines and healthier environments within the mining industry. To that end, we have instituted this Scholarship for Mining Committee.

**SCOPE:** This scholarship program shall be open to persons currently employed in the mining industry, safety and health fields, high school seniors or college students who meet the application requirements.

**APPLICATION REQUIREMENTS:** Each applicant must satisfy each of the following criteria:

1. Must have applied to and been accepted by an accredited college or university or currently enrolled at an accredited college or university in a degree program in mine safety, occupational or industrial health and safety, industrial hygiene, safety management or other related safety programs.
2. Must have taken ACT or SAT examinations, if applicable. (Scores must be provided by the high school guidance counselor, principal, or college registrar).
3. Must complete the Financial Disclosure Information section to verify financial status and expenses of all persons living in the applicant's household.
4. Must provide a transcript of grades for the last 3 years of high school, and if applicable, a transcript for all college credits.
5. Must submit a 100-200 word essay on "Why I want to study in the mine safety field."
6. Must complete the Survey of Extracurricular Activities.

7. Must submit two to three letters of recommendation (one academic, one personal and one from the mining community, if able).
8. Must complete the application and submit it through the Scholarship Program Chairperson, P.O. Box 2253, Meriden, CT 06450.
9. All applicants will receive consideration without regard to race, color, sex, age, national origin, religion or disability.

**Applications shall be submitted** to the Chairperson of the Scholarship for Mining Committee **not later than April 15, 1998**. The Chairperson's mailing address shall be advertised in the October, November, and December issues of the **Bulletin**. The committee Chairperson shall convene the committee not later than 30 days prior to the date of the Annual Meeting of the National Holmes Safety Association each year for the purpose of selecting the successful applicant(s).

## **RATING THE APPLICATION**

To preserve the impartiality in the review process, each application shall be copied and given an identification number by the Scholarship for Mining Committee Chairperson. The Chairperson shall obliterate all references to names, schools, location or other identifying information on the copies of the application for use by the Committee. At no time shall any of the obliterated information be made known until the review process is completed and the awardee(s) identified.

Each member of the committee shall evaluate each of the applications and affix a numerical rating according to the following:

### **1. Scholarship/Scholastic Standing = 22 points maximum**

#### **(College Prep)**

Top 10%	=	10
81-90	=	8
71-80	=	6
61-70	=	4
0-60	=	2

#### **(General Studies)**

Top 10%	=	9
81-90	=	7
71-80	=	5
61-70	=	3
0-60	=	1

*Persons who are currently employed disabled, retired or laid-off from the mining industry shall be granted 10 points for this criteria regardless of prior scholastic achievement. A person who has declared and completed 30 semester hours or equivalent in a 2-year technology degree program related to mining safety or a person who has completed 60 semester hours or equivalent in a four year degree program related to mining safety shall receive an additional 12 points bonus.*

2. **Financial Status/Expenses = 8** points maximum — Calculated using family income from all sources divided by the total number of family members supported by the income. See Application questions 1 -6. (Add 1 to family total for a disabled person supported by that income.)

\$3,000 or less	= 8 points
3,001-4,000	= 7 points
4,001-5,000	= 6 points
5,001-6,000	= 5 points
6,001-7,000	= 4 points
7,001-8,000	= 3 points
8,001-9,000	= 2 points
9,001 or more	= 1 point

*Example: A family of 4 with total income of \$22,000 would receive 5 points (\$22,000 ÷ 4= \$5,500). If one or more of the family members were disabled the point total would be 6 points (\$22,000 ÷ 5 = \$4,400).*

3. **Evaluation of Essay = 6** points maximum

Each member of the committee shall assign a numerical rating to the essay according to the following:

Enthusiasm and sincerity	= 4 points
Organization and grammar	= 2 points

4. **Extracurricular Activities = 5** points maximum — includes civic, community and school activities. (Based upon number of activities in which involved).

5 activities	= 4 points
4 activities	= 3 points
3 activities	= 2 points
2 activities	= 1 point
Leadership in any activity	= 1 point bonus

*Persons who are currently employed disabled retired or laid-off from the mining industry shall be granted 4 points for this criteria.*

## **TIE BREAKER PROCEDURES**

Should there be a tie, the applications shall be reviewed in accordance with the following priority:

1. College prep applicant over general studies applicant. (If applicants remain tied, proceed to tie breaker 2).
2. Applicant receiving most points for financial status. (If applicants remain tied, proceed to tie breaker 3).
3. Applicant receiving the most points for essay.
4. Applicant receiving most points for extracurricular activities.

Should the applicants remain tied through tie breaker #4, the committee chairperson shall call for a secret ballot and the members shall vote without comment. The chairperson shall continue to call for a secret ballot without comment until the tie is broken.

JOSEPH A. HOLMES SAFETY ASSOCIATION  
SCHOLARSHIP APPLICATION

*(All information given will be held in strict confidence.)*



Name \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_  
(Area Code)

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_  
(Area Code)

**EDUCATIONAL BACKGROUND**

High School \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_  
(Area Code)

**Other School(s) Attended:**

School \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_  
(Area Code)

School \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_  
(Area Code)

## SURVEY OF EXTRACURRICULAR ACTIVITIES

List civic, community and school extracurricular activities and check the extent of your participation:

	ACTIVITY	OFFICE HELD	YEARS INVOLVED
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

## STUDENT/PARENT DECLARATION STATEMENT

I hereby declare that I have read this application as completed and, to the best of my knowledge and belief, the information and answers given are complete and correct.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_ Parent./Guardian Signature \_\_\_\_\_

(Notary Certification)

## SCHOOL AUTHORITY ENDORSEMENT

Applicant's Class Rank \_\_\_\_\_ Number in Graduating Class \_\_\_\_\_

High School Curriculum: \_\_\_\_\_ College Prep \_\_\_\_\_ General Studies \_\_\_\_\_

ACT Scores \_\_\_\_\_ (Composite) \_\_\_\_\_

SAT Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Total \_\_\_\_\_

COMMENTS : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School Official's Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

## FINANCIAL DISCLOSURE INFORMATION

1. Are you now receiving or have you been notified that you will receive, financial aid, academic or sports scholarships, pen grants or other assistance that will **not** require repayment when you have finished your degree? \_\_\_\_ Yes \_\_\_\_ No  
(If yes, please answer the following questions)

A. What is the dollar amount of that assistance? \$ \_\_\_\_\_

B. Number of years that assistance will be provided? \_\_\_\_\_

2. Do you have family members that require special care that impacts your ability to receive financial support from your family? \_\_\_\_ Yes \_\_\_\_ No

(If yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

3. Number of persons in household? \_\_\_\_\_ Number employed? \_\_\_\_\_

4. Total adjusted gross income from all sources. \$ \_\_\_\_\_  
(*IRS form 1040/line 31 or 1040-A/line 16*)

5. All other income, taxed or untaxed. \$ \_\_\_\_\_  
(*Includes social security, vocational rehabilitation, welfare, etc.*)

6. Total income from all sources (1., 4 & 5 above). \$ \_\_\_\_\_

## ESTIMATED COLLEGE EXPENSES

Anticipated College or University \_\_\_\_\_

Location \_\_\_\_\_

Major Field of Study \_\_\_\_\_  
(Must **be in the field of safety**)

**EXPENSES PER YEAR:** Tuition/Fees \$ \_\_\_\_\_

\*Room and Board \$ \_\_\_\_\_

Books/Misc. \$ \_\_\_\_\_

\*Commuting Cost \$ \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

\* Only claim Room and Board **OR** Commuting Cost, **NOT BOTH.**

**COMMENTS:** \_\_\_\_\_

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.